DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name,

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COVER PLATE FOR WALL MOUNTED DEVICE

the specification of which is attached hereto;

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability as defined in 37 C.F.R. §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

I hereby appoint those practitioners at **Customer No. 27883** as my/our attorney(s) to prosecute this application, and to transact all business with the United States Patent and Trademark Office connected therewith.

Please send all correspondence to the above-mentioned Customer Number.

Inventor's Signature:_____

Full Name of Sole or First Joint Inventor:___Brian M. Ray_____

Date of Signature:___3/18/04_____

Residence Address:___2802 N. Carroll Ave., No. 1310, Dallas, Texas 75252_____

Citizenship:__U.S._____

Post Office Address:__Same as Residence_____